VERIF) STATEMENT (DECLARATION) CLAIMING WILL ENTITY STATUL ,7 CFR 1.9(f) and 1.27(b)) - INDE DENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled COMPOSITIONS AND METHODS FOR TREATING described in HEREDITARY DEGENERATIVE DISEASES

described in HEREDITARI DEGL	MEIGHT VE STOPHISTO	
<pre>[x] the specification filed he [] application serial no [] patent no</pre>	rewith, fi	led
I have not assigned, granted, convey contract or law to assign, grant, or any person who could not be classifi if that person had made the invention small business concern under 37 CFR 1.9(e).	onvey or license, any ri led as an independent in on, or to any concern wh	ghts in the invention to wentor under 37 CFR 1.9(c) wich would not qualify as a
Each person, concern or organization licensed or am under an obligation license any rights in the invention	under contract or law to	ned, granted, conveyed, or assign, grant, convey, or
[X] no such person, concern, concern, concerns or organization	or organization nizations listed below*	
*NOTE: Separate verified state person, concern or organization to their status as small entit	m having rights to the :	m each named invention averring
FULL NAME	BUSINESS CONCERN [) NONPROFIT ORGANIZATION
FULL NAMEADDRESS	BUSINESS CONCERN () NO PROFIT ORGANIZATION
FULL NAME	BUSINESS CONCERN () NONPROFIT ORGANIZATION
I acknowledge the duty to file, in change in status resulting in loss paying, or at the time of paying, due after the date on which status 1.28(b))	s of entitlement to smal the earliest of the iss	l entity status prior to ue fee or any maintenance fee
I hereby declare that all statement all statements made on information that these statements were made we the like so made are punishable by of Title 18 of the United States jeopardize the validity of the apto which this verified statement	n and belief are believed ith the knowledge that way fine or imprisonment, Code, and that such will plication, any patent is	willful false statements and or both, under section 1001 lful false statements may
Peter K. Law NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
Signature of Inventor	Signature of Inventor	Signature of Inventor

RULE 63 (37 C.F.R. 1.63) DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION THE UNITED STATES PATENT AND TRADERS OF

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

cl	a below named inventor, I low next to my name, and I an original, first and jaimed and for which a pate MYOBLAST THERAPY FOR MAMMA e specification of which (oint invent nt is sough	or (if plural names it on the invention e	c and sole inventor	ss and cit (if only o	izenship are as stated one name listed below) bject matter which is
[[X [an] is attached hereto.] was filed on <u>June 7, 199</u>] was filed as <u>PCT interna</u> d (if applicable to U.S. or	95 tional appl r PCT appli	as U.S. Appication No. PCT/cation) was amended	olication Serial No.	08/477,	377 -
th is pr li	hereby state that I have re- e claims, as amended by any material to the examinatio iority benefits under 35 U sted below and have also id filing date before that of e filing date of this appl	viewed and amendment on of this a U.S.C. 119/3 lentified be	understand the contentreferred to above. It pplication in accordance of any foreign appropriate the contentration of the contentration	ts of the above iden acknowledge the dutance with 37 C.F.R. oplication(s) for particular	tified spety to discl	cification, including ose information which hereby claim foreign nventor's certificate
Pr	ior Foreign Application(s) plication Number	:	Country			Day/Month/Year Filed
to pr	hereby claim the benefit unsted below and, insofar as ch prior application in the disclose material information applications and the nation of the disclose material information application (s	e manner pr tion as def ational or	ovided by the first pined in 37 C.F.R. 1.5	paragraph of 35 U.S	.C. 112, I	n is not disclosed in acknowledge the duty he filing date of the :
∴Ap] ==	plication Serial No.	Da	ate/Month/Year Filed			Status: patented, pending, abandoned
<u> </u>	8/354,944		12/13/94			Pending
thi 110 of	hereby declare that all statements are be at willful false statements of the Unite the application or any part of the the special the firm of the the firm the firm of the firm the the firm of the fi	and the li ed States C tent issued	ke so made are punished ode and that such will thereon.	able by fine or impri llful false statemen	ts were ma isonment, c nts may je	de with the knowledge or both, under Section opardize the validity
Rec ago in Be	d I hereby appoint the firm Rilee, Reg. No. 31,869, Hatty, Reg. No. 38,071, Pat vg. No. 25,620, David E. Bennents with-full power of substhe Patent Office connected namett, P.O. Box 2974, Green	Winston Kennett, Reg. 1 stitution and therewith naboro, Nor	nedy, Reg. No. 36,970 No. 32,194, and Williand revocation, to pros Address all communication to Communication to Communication to Communication to Carolina 27402.	Jones L. Lester, F. am J. Mason, Reg. No secute this applicat nications and telep 910) 273-442	Reg. No. 38 22,948, a ion and to hone calls	No. 34,180, David D. 1,721, Larry L. Coats, as my attorneys and/or transact all business to: Rhodes, Coats &
1)	Inventor's Signature	per	r Kai		Date X	8/23/95
	Inventor's Name (typed) _	Peter First	K.	Law Family Name		Canadian
	Residence (City) Memphi					Citizenship
	Post Office Address1770			(State/Foreign		• • • • • • • • • • • • • • • • • • • •
2)					Zip Code	
Í	Inventor's Signature Inventor's Name (typed) _				Date	
		First	Middle Initial	Family Name		Citizenship
	Residence (City)			(State/Foreign	Country)	.
	Post Office Address				Zip Code	
3)	Inventor's Signature				Date	
	Inventor's Name (typed) _					
		First		Family Name		Citizenship
	Residence (City)			(State/Foreign	Country	

_ Zip Code

Post Office Address

IN THE UNLIED STATES PATENT AND TRADEL_K OFFICE

In re patent application of

Peter LAW

Serial No. 08/477,377

Group Art Unit: 180

Filed: June 7, 1995

Examiner: Deborah Crouch

For:

MYOBLAST THERAPY FOR MAMMALIAN DISEASES

APPOINTMENT OF ATTORNEY

Honorable Commissioner of Patents and Trademarks Washington, D.C. 20231

Sir:

The undersigned sole inventor of the above-identified application hereby revokes all previous powers of attorney and appoints the following attorneys with full powers of substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Arthur Schwartz, Reg. No. 22,115;
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Please send all correspondence to:

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This day of March, 1996

Respectfully submitted,

Dr. Peter Law